

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/585,475 FILING DATE 6/02/00
APPLICANT(S)

16f2

8/2/04 CLAIMS

8/2/04

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14	1					
15		1				
16						
17						
18						
19						
20						
21						
22		1				
23						
24	1					
25		1				
26						
27		1				
28						
29		1				
30	1					
31		1				
32						
33	1					
34		1				
35						
36	1					
37	1					
38	1					
39						
40						
41						
42						
43						
44	1					
45						
46						
47						
48	1					
49		1				
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

*		*		*	
IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1				
52		1			
53					
54					
55	1				
56					
57					
58					
59					
60					
61					
62	1				
63		1			
64					
65					
66					
67					
68	1				
69					
70					
71					
72					
73					
74	1				
75		1			
76					
77	1				
78		1			
79	1				
80		1			
81	1				
82		1			
83	1				
84		1			
85		1			
86					
87					
88					
89					
90					
91					
92					
93					
94					
95					
96					
97					
98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

8/4/04

CLAIMS ONLY						SERIAL NO. 09/585,475	FILING DATE 6/02/00				
						APPLICANT(S)					
						CLAIMS					
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
101							/51				
102							/52				
103							/53				
104							/54				
105							/55				
106							/56				
107							/57				
108							/58				
109							/59				
110							/60				
111							/61				
112							/62				
113							/63				
114							/64				
115							/65				
116							/66				
117							/67				
118							/68				
119							/69				
120							/70				
121							/71				
122							/72				
123							/73				
124							/74				
125							/75				
126							/76				
127							/77				
128							/78				
129							/79				
130							/80				
131							/81				
132							/82				
133							/83				
134							/84				
135							/85				
136							/86				
137							/87				
138							/88				
139							/89				
140							/90				
141							/91				
142							/92				
143							/93				
144							/94				
145							/95				
146							/96				
147							/97				
148							/98				
149							/99				
150							/00				
TOTAL IND.	2		↓		↓		TOTAL IND.	↓		↓	
TOTAL DEP.	78		↔		↔		TOTAL DEP.	↔		↔	
TOTAL CLAIMS	20						TOTAL CLAIMS				
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS											

2 of 2